1-4 APR 2005 BIRCH, STEWART, KOLA

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ATTORNEY DOCKET NO. 4005-0258PUS1

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Insert Title:	A METHOD OF TRANSFERRING URFACE the specifications of which is attached hereto. If n		G ONTO ARTICLES pplication is identified by the atto				
•	and/or the following:	,	rr				
Fill in Appropriate	the specification was filed on			as			
Information - For Use	United States Application Number			;			
Without	and amended on			_(if applicable); and/or			
Specification Attached:	the specification was filed on	October 10), 2003	as PCT			
Attached:	International Application Number	PCT/FRO3/0)2990/	; and was			
	amended on			(if applicable)			
	I hereby state that I have reviewed and une by any amendment referred to above. I acknowledge the duty to disclose inform \$1.56. I do not know and do not believe the satthereof, or patented or described in any printerprior to this application, that the same was not application, that the invention has not been application in any country foreign to the Unite more than twelve months (six months for deson this invention has been filed in any count representatives or assigns, except as follows. I hereby claim foreign priority benefits or inventor's certificate listed below and have	me was ever known or ed publication in any of t in public use or on sa patented or made the ed States of America of igns) prior to this applary foreign to the Unit	to patentability as defined in Ti- used in the United States of A- country before my or our inver- le in the United States of Amer subject of an inventor's certifi- n an application filed by me or ication, and that no application ed States of America prior to States Code, §119 (a)-(d) of a any foreign application for pa	the 37, Code of Federal Regulations, america before my or our invention ation thereof or more than one year ica more than one year prior to this cate issued before the date of this my legal representatives or assigns a for patent or inventor's certificate this application by me or my legal my foreign application(s) for patent			
	a filing date before that of the application on	which priority is claim	ned:				
Insert Priority	Prior Foreign Application(s)	_	· .	Priority Claimed			
Information: (if appropriate)		ANCE	10/15/2002 (Month / Day / Year File	Y U			
(п арргорпасе)	(Number)	(Country)	(Mondi / Day / Teat I ne	Yes No			
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	(Number)	(Country)	(Month / Day / Year File				
	(Number)	(Country)	(Month / Day / Year File				
Insert Provisional Application(s):	I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below.						
(if any)	(Application Number)			(Filing Date)			
	(Application Number)			(Filing Date)			
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed more than 12 months (6 months for designs) Prior to the Filing Date of this Application:						
Insert Requested Information: (if appropriate)	Country	A	pplication Number	Date of Filing (Month / Day / Year)			
Insert Prior U.S.	I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s), including for continuation-in- part application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.						
Application(s):	(Application Number)	(Filing Date)	(Status	- patented, pending, abandoned)			
Page 1 of 2	(Application Number)	(Filing Date)	(Status	- patented, pending, abandoned)			

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10/531328

I hereby appoint the practitioners at CUSTOMER NO. 02292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

* DATE OF SIGNATURE

PLEASE NOTE: YOU MUST

BIRCH, STEWART, KOLASCH & BIRCH, LLP

or CUSTOMER NO. 02292

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

COMPLETE THE FOLLOWING:							
Full Name of First or Sole Inventor: Insert Name of Inventor Insert Date This Document is Syned	GIVEN NAME Pierre Residence (City State	FAMILY NAME DUMOUX	INVENTOR'S SIGNATURE	CITIZENSHIP	DATE* PMarch 29, 2005		
Insert Residence Insert Citizenship	7 rue Sampaix 71230 <u>SAINT-VALLIE</u> R (France) French						
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Full Name of Second Inventor, if any:	Name of Second		INVENTOR'S SIGNATURE		DATE*		
see above	Residence (City, State	& Country)		CITIŽENSHIP			
	MAILING ADDRESS (Complete Street Address including City, State & Country)						
Full Name of Third Inventor, if any	GIVEN NAME FAMILY NAME INVENTOR'S SIGNATURE			DATE*			
see above	Residence (City, State & Country)			CITIZENSHIP			
	MAILING ADDRESS (Complete Street Address including City, State & Country)						
Full Name of Fourth Inventor, if any	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE	., 	DATE*		
see above	Residence (City, State & Country)			CITIZENSHIP			
	MAILING ADDRESS (Complete Street Address including City, State & Country)						
Full Name of Fifth Inventor, if any	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*		
see above	Residence (City, State	e & Country)		CITIZENSHIP	<u> </u>		
	MAILING ADDRESS (Complete Street Address including City, State & Country)						
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